

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		01/21/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		15	72405
FORMALITY REVIEW	<i>[Signature]</i>	70976	9-11-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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